

JB 0386

POSITION	ID NO.	DATE
CLASSIFIER	17	1-14-93
EXAMINER	519	5-4-93
TYPIST	2166	5-4-93
VERIFIER	(15)	5-10-93
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

## INDEX OF CLAIMS

Claim	Date			
Final				
Original				
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SYMBOLS

/	Rejected
-	Allowed
- (through number)	Canceled
-	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

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